

§2131. Executive Lobbying Registration/Renewal

EXECUTIVE LOBBYING REGISTRATION
RENEWAL FOR
THE YEAR OF 2008
(Fill in year.)

Executive Lobbyist Registration No. 334

Instructions

- Print in ink or type.
- Complete form and return with \$110 registration fee to the Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Rouge LA 70808, or fax to (225) 763-8787. For information or assistance, call (225) 763-8777 or (800) 842-6630.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Registrations expire as of December 31 unless a renewal is submitted between December 1 and January 31.

FOR OFFICE USE ONLY

Postmark Date: 11/24/07

Ren-08

Q.K.# 108853

\$110.00

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- NAME Harrison Julie
Last First MI
- BUSINESS PHONE 225-756-9669
Area Code and Phone Number
- FAX NUMBER N/A
- BUSINESS ADDRESS 16381 Crystalwood Circle, Baton Rouge, LA 70817
Street and No. City State Zip
- MAILING ADDRESS Same as above
Street and No. City State Zip
- EMPLOYER ELI LILLY & COMPANY
- EMPLOYER'S ADDRESS LILLY CORPORATE CENTER, INDIANAPOLIS IN. 46285
Street and No. City State Zip
- LIST BELOW (a) Names of persons, groups, or organizations which you represent and on whose behalf expenditures are made; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.
 - Name ELI LILLY & COMPANY
 - Address Same as above
 - Business or purpose Pharmaceutical Sales Representative
 - Does this person pay you? Yes
 - If No, who pays you? _____

**EXECUTIVE LOBBYING
REGISTRATION FORM**

Executive Lobbyist Registration No. _____

2. Name _____
Address _____
Business or purpose _____
Does this person pay you? _____
If No, who pays you? _____
3. Name _____
Address _____
Business or purpose _____
Does this person pay you? _____
If No, who pays you? _____
4. Name _____
Address _____
Business or purpose _____
Does this person pay you? _____
If No, who pays you? _____

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by LSA-R.S. 49:71 et seq. has been deliberately omitted.

Julie L. Hanson

Signature of Lobbyist

